TEXAS Department of Housing and Community Affairs Audit Certification Form (ACF)

Super Circular Subpart F, Audit Requirements, will apply to audits of the fiscal years that begin on or after **12/26/14.**

Entity*:	Fiscal Year End (FYE):	
*Please indicate any DBAs or affiliations	mm/dd/vv	

For State Funding Check appropriate box:

We <u>have exceeded</u> \$750,000 or more in state awards or have an outstanding loan balance associated with a state resource of \$750,000 or more with continuing compliance requirements, or a combination thereof for the fiscal year referenced above. We will have our Single Audit or Program Specific Audit completed and will submit the audit report within nine (9) months after the end of the audited fiscal year.

We <u>did not exceed</u> 750,000 or more in state awards or have an outstanding loan balance associated with a state resource of \$750,000 or more with continuing compliance requirements, or a combination thereof for the fiscal year referenced above. A Single Audit or a Program Specific Audit is not required for this fiscal year. *(Fill out Federal and State Funds Schedules below)*

For Federal Funding Check appropriate box:

We <u>have exceeded</u> \$750,000 or more in federal awards or have an outstanding loan balance associated with a federal resource of \$750,000 or more with continuing compliance requirements, or a combination thereof for the fiscal year referenced above. We will have our Single Audit or Program Specific Audit completed and will submit the audit report to the Federal Audit Clearinghouse at https://harvester.census.gov/facweb/ and notify the Department of the upload within nine (9) months after the end of the audited fiscal year.

We <u>did not exceed</u> \$750,000 or more in federal awards or have an outstanding loan balance associated with a federal of \$750,000 or more with continuing compliance requirements, or a combination thereof for the fiscal year referenced above. A Single Audit or a Program Specific Audit is not required for this fiscal year. *(Fill out Federal and State Funds Schedules below)*

(Must be filled out if Single Audit or Program Audit is NOT required)

Federal Funds Schedule							
Federal Grantor	Pass-through Grantor		Program Name & CFDA Number		Contract Number		Expenditures
						Ī	\$
							\$
							\$
Total Federal Expenditures for the Fiscal Year					\$		

				State Funds Schedule		
State Grantor		Pass-through Grantor (if any)		Program Name	Contract Number	Expenditures
						\$
	1					\$
						\$
Total State Expenditures for the Fiscal Year					\$	

(authorized signature) (Executive Director, Mayor, County Judge)	(printed name)	(title)
(mailing address)	(city, state)	(zip code)
(om ail address)	(telephone number)	(fay pumbar)
(email address)	(telephone number)	(fax number)

In accordance with the Texas Administrative Code, Title 10, Part 1, Chapter 1, Subchapter D, Rule §1.403 (k), the Department may fail to renew, amend, extend and/or not enter into a new Contract with a Subrecipient until receipt of the required Single Audit Certification form....

WARNING: The U. S. Code, Title 18. Part 1, Chapter 47, §1001 (a)(1)-(3) indicates that an Entity is guilty of falsification and fraud for knowingly and willingly making false or fraudulent statements to any department of the United States Government.